Dental Insurance Premium Cost City of Wichita 2012

Type of Plan	<u>Preferred</u>	<u>Traditional</u>
	per pay period	per pay period
Single	9.75	15.17
Single + 1	18.53	30.35
Family	32.27	50.69

Employees enrolled in Dental Insurance should check with their provider to ensure that they accept the Dental Plan that you have selected.

Reminder: Employees have 30 days from a related qualifying event to make changes to their enrollment. The changes must be in writing.